

UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF WEST VIRGINIA

<u>Jus</u>	atin Han	nmind	3538/29	
	e the full name of the plain this action).	aintiff	(Inmate Reg. # of each Pla	aintiff)
VERSUS		CIVIL ACT	TION NO. 3:20-cv-00795	
Pr.m.	Care	(Number to l	be assigned by Court)	J. 42.54
	2 x 198			
	e the full name of the dej ts in this action)	fendant		
		COMPLAINT	~ .	
I. Previ	ous Lawsuits		,	
Α.			federal court dealing with t relating to your imprisonment	
	Yes	Not		

If your answer to A is yes, describe each lawsuit in the space below. (If there

B.

is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same outline).		
1.	Parties to this previous lawsuit:	
	Plaintiffs:	
	Defendants:	
2.	Court (if federal court, name the district; if state court, name the county);	
3.	Docket Number:	
4.	Name of judge to whom case was assigned:	
5.	Disposition (for example: Was the case dismissed? Was it appealed? Is it still pending?	
6.	Approximate date of filing lawsuit:	
7.	Approximate date of disposition:	

II.	Plac	e of Present Confinement: WKJ
	Α.	Is there a prisoner grievance procedure in this institution?
		Yes No
	В.	Did you present the facts relating to your complaint in the state prisone grievance procedure?
		Yes No
	C.	If you answer is YES:
		1. What steps did you take?
		2. What was the result?
	D.	If your answer is NO, explain why not: I didt high what
III.	Parti	es
	(In item A below, place your name and inmate registration number in the first that and place your present address in the second blank. Do the same for addit plaintiffs, if any.)	
	A.	Name of Plaintiff: Justin Hammont
		Address: with one o' Hankin Place
	B.	Additional Plaintiff(s) and Address(es):

(In item C below, place the full name of the defendant in the first blank, his/her official position in the second blank, and his/her place of employment in the third blank. Use item D for the names, positions, and places of employment of any additional defendants.)

aployed as: Medical staff
and the same of th
tional defendants:

IV. Statement of Claim

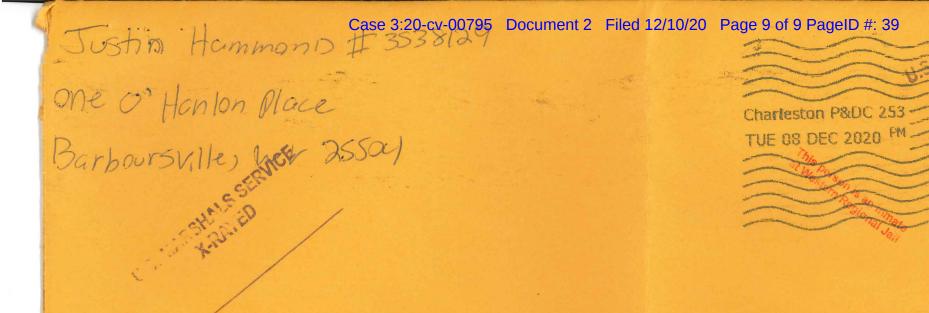
State here as briefly as possible the <u>facts</u> of your case. Describe how each defendant is involved. Include also the names of other persons involved, dates and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, set forth each claim in a separate paragraph. (Use as much space as you need. Attach extra sheets if necessary.)

On Aug 975 or I I hit my button because
I Couldn't Breath and had Chest pain
They Came got me took me to the sally port
I Asked to Sit clown when I Set clown I
don't remember Anything After that when
I came to there were so many people evound
me They said my heart stoped And They
had to do-4. Chest in prostors to get it

IV. Statement of Claim (continued):
beating Again They Called 911, then I was
taken to the hospital. They admited me
but After hours I signed a refusel, belowse
I was supposed to Go hoon I came back
on Sep. 24, 2020 and on the Zod of
October 2026, I hit my button and
Said I needed to go to medical I was
having thest pairs and Couldn't breath about
30 mini later, I hit it again the officer fol
Vhe he called them, but he said he'd call the
To be Count
State briefly exactly what you want the court to do for you. Make no legal arguments. Of the
I would like one and A Half
Million Pollors

v.	Re	ief (continued)):
-		
VII.	Cou	nsel
	Α.	If someone other than a lawyer is assisting you in preparing this case, state the person's name:
	В.	Have you made any effort to contact a private lawyer to determine if he or she would represent you in this civil action?
		Yes No
		If so, state the name(s) and address(es) of each lawyer contacted:
		If not, state your reasons: Havnt Got to that
		POINT YET.
	C.	Have you previously had a lawyer representing you in a civil action in this court?
		Yes No

If so, state th	ne lawyer's name and address:
Signed this	day of Movember, 20,20.
	Signature of Plaintiff or Plaintiffs
xecuted on $1 - 25$	perjury that the foregoing is true and correct. (Date)
	Signature of Movant/Plaintiff
	*
gnature of Attorney	•



Clerk, united States District Court
845 Fifth Avenue, Room 101
Huntington, WV 25701